

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF JAMES E. SHELTON DBA FINAL VERDICT SOLUTIONS	COURT CASE NUMBER 1:17-mc-00008
DEFENDANT CAPITAL ADVANCE SOLUTIONS, LLC	TYPE OF PROCESS Writ of Execution

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
AFFINITY FEDERAL CREDIT UNION, Garnishee
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
73 Mountainview Boulevard, Basking Ridge, NJ 07920

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

James E. Shelton
316 Covered Bridge Road
King of Prussia, PA 19406

Number of process to be served with this Form 285

1

Number of parties to be served in this case

1

Check for service on U.S.A.

RECEIVED USMS
NEWARK, N.J. 07102
2017 APR 25 AM 7:07

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Normal business hours Monday-Friday

Signature of Attorney other Originator requesting service on behalf of:

James E. Shelton

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

484-626-3942

DATE

4/19/17

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 50	District to Serve No. 50	Signature of Authorized USMS Deputy or Clerk C. Roberts	Date 4-25-17
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

GILLIAN PINTER, LOSS PREVENTION SPECIALIST

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date
5/2/17
Time
9:29
☒ am
☐ pm

Signature of U.S. Marshal or Deputy

S. M. M. 4090

Service Fee \$65	Total Mileage Charges including endeavors 50 mi (RT) x .53¢ = 26.75	Forwarding Fee	Total Charges	Advance Deposits 300.00	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS: 1.) SERVED GILLIAN PINTER, LOSS PREV. SPEC., OF AFFINITY FEDERAL CREDIT UNION AT 73 MOUNTAINVIEW BLVD., BASKING RIDGE, NJ

DISTRIBUTE TO:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev. 11/13